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STRENGTHENING OF THE COORDINATION OF HUMANITARIAN AND DISASTER
RELIEF ASSISTANCE OF THE UNITED NATIONS, INCLUDING SPECIAL
ECONOMIC ASSISTANCE: SPECIAL ECONOMIC ASSISTANCE TO INDIVIDUAL
COUNTRIES OR REGIONS

Assistance for the reconstruction and development
of Djibouti

Report of the Secretary-General

I. INTRODUCTION

1. The present report is submitted to the General Assembly pursuant to resolution 49/21 F of 20 December 1994 on assistance for the reconstruction and development of Djibouti. It provides a brief description of the progress made in the implementation of that resolution.

II. GENERAL SITUATION

2. The Republic of Djibouti is strategically situated in the Horn of Africa at the juncture of the Red Sea and the Indian Ocean. It has a coastline of 370 kilometres and common borders with Eritrea in the north, Ethiopia in the west and south and Somalia in the south-east. The country covers an area of 23,000 kilometres characterized by an arid climate and extremely limited water and agricultural potential. Annual rainfall averages only 130 millimetres and there is no significant food production.

3. The country's population is estimated at 520,000 according to the 1991 census. With an annual natural growth rate estimated at 3.1 per cent, the

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population is projected to double in 22 years. In addition, the presence of a large refugee and displaced population from neighbouring countries has placed enormous strain on the meagre resources available. The total number of refugees and displaced persons is not known and estimates range from 100,000 to 150,000. The majority of Djiboutians are from the Afar and Issa ethnic groups; the other groups are Yemeni Arabs and French.

4. The population is mostly urban and is concentrated in the capital. This high urban concentration has led to many economic and social problems. In terms of human development, Djibouti is ranked, according to the Human Development Report 1994, 163 among the 173 countries reviewed. According to that report, the adult literacy rate is no more than 19 per cent, while the life expectancy at birth is one of the lowest in the world (48 years). Women play an active role in the economy and constitute 32.2 per cent of the labour force. In the formal urban sector, they are employed mainly as clerical or administrative staff and in rural areas they play an important role in livestock raising.

5. The economy is dual and is characterized by an important informal sector directed towards customers with a low purchasing power, and by a modern economy based on a solid port and airport infrastructure, serving a population with a high purchasing power but almost strictly dependent on imports.

6. Djibouti enjoys one of the most liberal economic regimes in Africa. Its currency is freely convertible and there are no controls on capital movement.

7. Because of a lack of natural resources, the economy of Djibouti is based on services, which contribute about 70 per cent of the country's gross domestic product, while the agricultural and industrial sectors remain very small. Djibouti enjoys a relative comparative advantage in the region because of its efficient port infrastructure, banking establishments, telecommunications facilities and to a certain extent the airport and the railroad link up to Ethiopia.

8. Owing to the political instability in the region and the resulting decline in goods and services, the economy has been declining in the past few years. Since all goods are imported and there are few exports, Djibouti has a structural trade deficit and the overall budget is covered in part by external aid.

9. The real gross domestic product grew on average by 4 per cent over the period 1988-1992, fuelled in part by a surge in port activity resulting from the civil war and in part by the transit of massive food aid to the hinterland of Djibouti, Ethiopia and Somalia. The armed conflict in the north and south-west, which forced most of the country's development projects to a brutal halt, coupled with the dire socio-political situations prevailing in Ethiopia and Somalia, accelerated markedly the deterioration of Djibouti's economy.

10. At the social level, conditions of life are very difficult, characterized by poor nutrition as a result of low purchasing power, poor health, with widespread diseases such as tuberculosis and acquired immunodeficiency syndrome (AIDS), inadequate educational facilities and limited qualified manpower. Above all, unemployment and urban overpopulation constitute critical problems, which

are exacerbated by the presence of the large number of refugees from neighbouring countries.

11. According to available data, more than 40 per cent of the health services are given to foreigners who are attracted to the proximity and the quality of Djibouti's hospitals and health centres. With the recent conflicts in the Horn of Africa, refugees (mostly from Ethiopia and Somalia) have increased the number of non-Djiboutians who benefit from the national health services. The health services are free for both nationals and refugees, and with the increasing numbers of beneficiaries, the health system is no longer able to provide adequate services to the entire population. Moreover, the armed conflicts in the north of the country have caused physical damages to the health infrastructures.

12. The national education system consists of six years of primary education, four years of lower secondary education and three years of secondary general education.

13. Djibouti's primary education is presently provided by a network of 64 public and 9 private schools. Of the 33,005 children who were in primary schools in 1994, 29,715 were enrolled in public schools and 3,290 in private Koranic schools. Student-teacher ratios in primary schools range from 34-43:1 in the rural areas and are higher, at about 46:1 in the city. Student classroom ratios range from 35-81:1 and average at about 65:1. Some schools with large numbers of students are forced to deal with the problem by holding double shifts, a practice which may have to be extended if the growing demand for public education cannot be met by increasing investment in more schools.

14. The employment situation is closely linked to the educational sector of the country. Each year, more than 4,000 young people arrive on the labour market without any qualification, having had no access to a general secondary education or to any kind of professional training. The number is expected to grow within the next few years, particularly in the capital, Djibouti. The labour market is disproportionate because of the unbalanced structure of the Djiboutian economy.

15. It is estimated that more than 80 per cent of the enterprises are within the informal and semi-informal sector, including a large number of informed micro-enterprises, which play a key role in the economy of the country.

III. OVERVIEW OF THE CURRENT SITUATION

16. The recent changes in the region, particularly the collapse of the old regime in Ethiopia, the independence of Eritrea and the civil war in Somalia, have affected Djibouti, which has also experienced in the past few years its own internal strife between the Government and opposition groups.

17. The political negotiation initiated shortly after the multi-party presidential elections of April 1993 culminated in the official signature of a national Peace and Reconciliation Accord. The main provisions of this agreement further confirm the Government's willingness to associate FRUD (the rebel group) and all opposition groups in the democratization process.

18. In order to create an environment of peace and social stability, the Government has initiated a process of demobilization of soldiers, whose numbers increased from several thousand to up to 20,000. This process may take some time, as opportunities to reintegrate the demobilized population into civilian life are not readily apparent and need to be explored in the overall context of the rehabilitation and reconstruction programmes.

19. The Government's present thinking is to provide each demobilized soldier with a financial allowance, which would facilitate the demobilization process. This would, however, require a substantial amount of cash, which may not be available in view of the budget deficit spurred by the war efforts and the decline in government revenues.

20. The burden of the war effort, combined with a swelling civilian wage bill, further depressed the country's financial situation. Faced with financial obligations largely exceeding its capacity, the Government turned to once cash-rich public enterprises and drew heavily on their reserves, to the point of depletion. As this internal source of financing is drying up, the volume of external aid, which had been significant, is now on a downward trend.

21. According to the World Bank, the 1993 budget deficit stood at an alarming 12 per cent of the gross domestic product. Despite a slight improvement in 1994, the budget deficit is likely to widen as a direct result of a sustained decrease in fiscal and non-fiscal revenues brought about by mounting inflationary pressures spurred by excessive borrowing from the banks. All this will culminate in fewer revenue being collected, which in turn will render the reimbursement of cumulated arrears (projected to reach 25 billion Djibouti francs in 1995) all the more problematic. A worsening current account position (10 per cent of the gross domestic product in 1993) compounds the overall situation of the economy.

22. The root causes of Djibouti's problems are economic. These are in part structural and in part compounded by continuous inflows of refugees from neighbouring countries affected by war or civil strife. The country's frail economy is able to absorb less than 60 per cent of the workforce and most of those employed earn only subsistence wages. Consequently, most of the peoples of Djibouti are poor and poverty is increasing because of diminishing trade links with Ethiopia and Somalia.

23. The overall situation of the country is also characterized by limited pasture land and a high rate of livestock mortality. If there is no rainfall in the near future, the ground-water level will be reduced, resulting in a shortage of drinking water. Given the increasing influx of immigrants and refugees into Djibouti, the need for water is increasing. In the town of Djibouti, with 65 per cent of the total population, the water points in certain coastal areas have reached a high degree of salinity and imperil the agro-pastoral perimeters that were developed a few years ago. The drought is therefore not only the result of climatic change but it is also structural to the extent that it is aggravated by overexploitation and consumption of scarce water resources. The situation was exacerbated by the internal conflicts and the resultant displacement of the rural populations, who are confined in remote areas with no

pasture for their livestock. They are now receiving food assistance from the national army.

24. With regard to social conditions, Djibouti is facing a serious health situation, with widely prevalent epidemic diseases. There are 3,000 new cases of tuberculosis every year, and malaria is on the increase. Sexually transmitted diseases are also increasing, signalling a situation that is difficult to control. Malnutrition continues to be a major public health problem, particularly in the prevailing situation of economic crisis and pressures from refugees and displaced persons.

IV. MAJOR ISSUES

25. The situation in Djibouti has been adversely affected by the evolving critical situation in the Horn of Africa, the presence of tens of thousands of refugees and persons displaced from their countries, the extremes of local climate and cyclical droughts, torrential rains and floods such as those that occurred in 1989, and the extremely limited financial capacity of the country to implement reconstruction and development programmes.

26. In addition, fighting between the Government and armed opposition groups in the northern part of the country resulted in a large displacement of the civilian population. It also resulted in the recruitment of 12,000 soldiers who must now be demobilized and reintegrated into civilian life.

27. The Government of Djibouti has expressed a strong desire for the demobilization of 11,500 soldiers. The idea of demobilization started in early 1994 when the Government announced that security problems were under control in the previously war-affected areas. So far, steps have been taken to prepare for the separation from the national army of 11,500 soldiers enrolled during the two-year conflict. The demobilization includes new recruits and soldiers who were enrolled during the hostilities.

28. Although the Government has undertaken to pay separation fees for the demobilized soldiers, it is unlikely that the demobilization process can proceed without external support. Given the need for a large reconstruction scheme, food aid will be an incentive for the former soldiers and displaced persons to participate in rehabilitation activities involving the basic infrastructure, such as wells, health units and schools.

29. Djibouti has become a refugee host country. The increasing number of displaced persons and refugees, combined with the continuous flow of illegal immigrants in search of jobs and assistance, has become a matter of great concern to the Government.

30. Although there are no precise figures on the number of refugees, internally displaced persons and illegal immigrants, the Government believes that there are over 100,000 persons who are in need of assistance in the town of Djibouti alone. It also claims that an equal number are affected by the drought.

31. Djibouti suffers from recurrent droughts. The first rains of 1994 started late in the southern parts of the country, while the northern region has not seen rain for over two years. Despite a normal rainfall in 1995, water sources remain low, resulting in the migration of people to the capital.

32. Food requirements are met mostly through food imports, averaging some 60,000 tons of cereals annually. Djibouti's normal structural food aid requirement stands at about 18,000 tons. The World Food Programme (WFP) will provide some 7,000 tons, primarily to refugees from Somalia, but also to Djiboutian schoolchildren, orphans and hospital patients and participants in food for work schemes.

33. The health situation has immediate and long-term implications. The Government is providing medical services not only to its own people but also to a large number of refugees from Ethiopia and Somalia seeking free medical treatment in Djibouti. Those refugees also bring with them diseases such as tuberculosis. While the immediate need is to strengthen the country's capacity to address the problems of tuberculosis, malaria, AIDS and malnutrition through immunization campaigns and the provision of essential drugs, a longer-term solution must be found at the regional level to improve the health situation in the neighbouring countries.

34. Djibouti's educational system, which is modelled on the French system, is currently under pressure to meet the challenges of growing unemployment, a rising demand from a young population and a large influx of refugees.

35. With very high drop-out rates of about 10 per cent per annum for the last two grades of primary school and an estimated drop-out rate of over 30 per cent at the end of the primary cycle, it is not surprising that only about 27 per cent of those completing primary education gain a place in secondary school. That high level of attrition at a stage when continuing learning is both optimal and desirable represents, from an educational and manpower planning perspective, a wasted national opportunity to expand and strengthen the human resource pool for the enhancement of national productivity. Improvement in the overall quality of both primary and secondary education will require tackling the internal inefficiencies in the existing system and improving services in keeping with the nation's need for an educational content responsive to the changes occurring in the national market economy.

36. Technical and vocational education in Djibouti is also modelled on the French system and begins at the secondary-school level. Opportunities of a limited and very specific kind exist for some students to pursue professional training. Clearly, there is an ongoing need to give the issue of growing national unemployment, especially among school drop-outs and youths, the urgent attention it deserves.

37. No active employment policies have been elaborated owing to the weak institutional capacity of the Ministry of Labour and Professional Training. The challenge, in terms of employment, is to be able to design a system that would target the unemployed according to the different categories: unskilled, school drop-outs, demobilized soldiers, refugees and women.

V. ROLE OF THE UNITED NATIONS

38. One characteristic of the operational activities of the United Nations system in Djibouti is the sustained and close collaboration of all United Nations agencies present in the country to coordinate their efforts in order to respond to the growing social and economic problem of the refugees. The refugee situation in Djibouti is affecting not only general security but also the health sector and sanitation. Djibouti's health infrastructure, although not greatly developed, is accessible to all the local population. The inflow of refugees from neighbouring countries affected by war who are benefiting from the health services has contributed to placing a heavy burden on the already weak public-health infrastructure. That situation has also contributed to a deterioration of the environment and of the sanitation facilities in the country, especially in the capital, and resulted in an outbreak of cholera in July 1993.

39. The organizations of the United Nations system present in Djibouti are constantly dealing with that problem by developing activities related to repatriation, food distribution and education, by initiating regrouping efforts to resettle refugees in camps and by clean-up operations in the capital.

40. Activities of the United Nations Development Programme (UNDP) during the past year were concentrated on the identification, formulation and approval of a limited number of priority projects and on the management of ongoing projects.

41. A major accomplishment of UNDP has been the identification of a new role for the private sector, now considered by the Government and the donor community as one of the main engines for economic and social development. In 1993, UNDP played a leading role in that regard by encouraging the institutional reform and restructuring of private-sector legislation through a reshaping of Djibouti's code of commerce, which covers fiscality, the investment code, work legislation and investment promotion, etc. To that end, US\$ 500,000 was made available from the UNDP Management Development Programme.

42. Protection of the environment has also been an important aspect of UNDP's agenda. A disaster management workshop was held in October 1993 and a national workshop on sustainable development and environmental management was held in December 1993. Both workshops helped to identify national needs and to develop a strategy for the development of new legislation.

43. UNDP led the United Nations Inter-Agency Assessment Mission to Djibouti in April 1994. The Mission's findings and recommendations are expected to form the basis for full-scale reactivation of technical assistance in support of the Government's efforts in the challenging task of reconstruction and development. Essentially, the Mission recommended three actions: a relief programme consisting of food, water and essential drugs for 35,000 to 40,000 displaced people; a rehabilitation programme in the war-affected areas through food-for-work projects and involving non-governmental organizations and United Nations Volunteers; and a round-table meeting to be organized by UNDP to provide a forum for the Government of Djibouti and its partners to discuss and agree on a sustainable development strategy.

44. The preparatory process of the round table reached a climax with the finalization of a document on macroeconomic reforms. The paper, officially approved by the Council of Ministers in February 1995 and endorsed by the donor community, including the International Monetary Fund (IMF) and the World Bank, calls for far-reaching structural economic reforms and a major overhaul of the current institutional framework. The Government, in consultation with UNDP, set the date of the round-table meeting for 16 October 1995 at Geneva. This will allow ample time to refine (with the joint assistance of IMF, the World Bank and UNDP) the specifics of the policy measures contemplated by the Government.

45. In line with the recommendations of the Inter-Agency Mission, WFP prepared a draft project proposal, which deals with the emergency and rehabilitation programme for Djibouti. Initially, this proposal was to be submitted to the Department of Humanitarian Affairs of the Secretariat for an appeal to the donor community. Instead, it was suggested that the report be submitted to the round-table meeting and the Government of Djibouti has concurred.

46. The Government of Djibouti continues to be seriously concerned about the presence in the country of a large number of refugees, displaced persons and illegal immigrants, victims of the instability, poverty and severe droughts witnessed by the subregion in recent years, who are putting heavy pressures on Djibouti's limited resources and overstressing the social and economic infrastructures. The authorities are estimating the number of these categories of persons at 120,000. Following an appeal made by the Government of Djibouti in early 1993 requesting the assistance of the international community to help Djibouti cope with the demographic burden the country is facing, the Office of the United Nations High Commissioner for Refugees (UNHCR) agreed to transfer 30,000 refugees/displaced persons from the capital to the existing refugee camps, where care and maintenance will be provided to them pending their voluntary repatriation to Ethiopia and Somalia. Concurrent with the transfer operations was the establishment of a new registration system in order to have more accurate figures from the refugee camps, the participation of international specialized non-governmental organizations in the implementation of the refugee assistance programme and the improvement of the operational capacities and the financial management of the Office national d'assistance aux réfugiés et personnes sinistrées (ONARS), the principal implementing partner of the refugee programme in Djibouti.

47. Out of the targeted group of 30,000 persons, 15,000 were to be transferred to the camps as at 31 August 1995. Their number has increased the camp population to 40,000 persons (half of them Ethiopians and half Somalis) who were accommodated in four refugee camps, namely, Holl Holl, Ali Adde, Assamo and Aour Aoussa. The Somali refugees, who originated from Awdal Province in north-west Somalia, had fled their country as a result of internal conflicts and civil war, mainly following the downfall of the Siad Barre regime in 1991. The Ethiopian refugees entered Djibouti in 1991, following the collapse of the Mengistiy regime and the subsequent civil disturbances. Most of the refugees in Djibouti are of nomadic background, the average size of the family is four persons and the women and children among them represent around 80 per cent of the overall refugee population. It should be noted that the frequent movements of the refugees between the camps and the city of Djibouti seeking better living conditions and job opportunities is resulting in additional pressures on the

already overcrowded city, exacerbating stress on basic services and making attempts to obtain accurate figures of the refugee population all the more difficult.

48. The living conditions in the refugee camps are at a minimal level and there are no prospects for the introduction of income-generating activities. The four camps are operated by ONARS and are located in sites that are barely accessible, close to the Ethiopian and Somali borders. Food assistance is provided by WFP, the medical and nutritional sectors are covered by the Association of Medical Doctors for Asia and the educational activities are covered by the United Nations Educational, Scientific and Cultural Organization (UNESCO). About 1,500 refugee children attend the camp schools. The Evangelical Protestant Church of Djibouti provides limited social assistance to urban refugees living in the town of Djibouti. In addition to its role of providing international protection to refugees, the UNHCR branch office in Djibouti funds and ensures the overall supervision and monitoring of the assistance programme. The initial assistance budget for 1995 is \$1.5 million, not including the estimated \$4 million in food assistance provided by WFP.

49. In the search for durable solutions to the refugee problem in Djibouti, two major repatriation programmes were initiated by UNHCR. Following several difficulties and delays, the programme of repatriation to Ethiopia was started on 26 September 1994 and allowed over 17,000 persons to be repatriated voluntarily to their country as at 20 March 1995. The repatriates were assisted by UNHCR and received food, non-food items, cash assistance and transportation. Rehabilitation works have been conducted in the areas of origin of the returnees under the cross-mandate approach. The programme resulted in the reduction of the camp population from 40,000 to 23,000 persons and in the closure of the Aour Aoussa camp on 28 February 1995. The programme of repatriation to Ethiopia will continue, with 15,000 persons to be transferred from the town of Djibouti. They will not be accommodated in the camps but will be given the possibility of voluntary repatriation to Ethiopia following a short transit period in a special centre erected by UNHCR for the purpose. This programme was expected to start in mid-1995 after all concerned parties, including the two Governments, have agreed on its modalities and timing.

50. Based on the relative stability that has gained momentum in the north-west region, a programme of repatriation to Somalia has been set up by UNHCR. In collaboration with the Government of Djibouti and the Hargeisa administration, a tripartite committee was established, as well as the terms of reference of the repatriation. As part of the confidence-building process, visits have been made to the villages of origin of the refugees in Awdal Province in order to assess the rehabilitation and reintegration needs. Information meetings with representatives of the refugees have been organized. Elders from the region of origin have been brought to Djibouti to visit the camps and meet with the intending returnees. A registration process conducted in the camps resulted in the registration of 15,418 volunteers for repatriation. As part of the rehabilitation programme, more than 100 quick-impact projects, comprising water, education, health, livestock and income-generating activities, have been launched by UNHCR and non-governmental organizations in north-west Somalia. Despite the progress achieved, the repatriation programme to north-west Somalia is, at present, stifled for various reasons that are mainly related to security

conditions, ethnic differences and the lack of an administration in charge of the region.

51. Owing to its position at the crossroads of the Horn of Africa, Djibouti has long been affected by circumstances in neighbouring countries. In 1993, about 5,532 metric tons of commodities, valued at about US\$ 3 million, were made available by WFP to assist 30,000 Somali and Ethiopian refugees in the four camps. The number of refugees is expected to increase as the Government has opted to evacuate some families from urban centres to the camps.

52. WFP is also providing assistance to schools, hospitals and orphanages. School feeding is meant to improve the health and nutrition of children and to increase their energy and alertness, building a resource of educated people. Provision of school meals has been instrumental in increasing enrolment among rural children. In the past three years, more than 4,000 schoolchildren, 37 per cent of them girls, participated in the project. Similarly, food aid to the health sector acts as an incentive for out-patients to attend centres for continuous treatment against tuberculosis and as a budgetary saving by providing rations through hospital meals to in-patients. Over 3,000 recipients country-wide benefit from the food assistance. Funds saved as a result of WFP food donations serve to improve health facilities.

53. Concern about seeing beyond emergencies to long-term development accounts for the idea of food-for-work projects. The rationale behind these projects is that they provide additional food for those whose incomes are too low for them to have access to sufficient food for a healthy and productive life; the food supplied can also result in a substantial addition to their income. For this purpose, intensive infrastructure work has been undertaken in Djibouti by poor households, with food provided as an incentive. The objective of these multipurpose food-for-work projects is to assist schemes for the improvement of rural infrastructure, reforestation training and other activities aimed at increasing the self-reliance of the rural population. Food aid through food-for-work has created opportunities for about 2,000 recipients, 25 per cent of them women, in both rural and urban areas.

54. UNDP and WHO are very much involved in the fight against AIDS. In 1993, they contributed to the creation of a counselling unit that will help reduce the impact of the epidemic through education of the population and public sensitization and awareness programmes. The unit was established in the context of the National Committee for the Fight against AIDS, which UNDP has also supported by training its members through financing from the Special Programme Resources/AIDS Division (SPR/AIDS Division) and a field visit to three African countries where the AIDS epidemic is widespread (Zambia, Senegal and Uganda). In addition, a project proposal elaborated by the members of the National Committee is now under evaluation by the SPR/AIDS Division. In May 1995, UNDP and the Government signed a project document committing US\$ 8,900 (out of indicative planning figure resources) to combat the human immunodeficiency syndrome (HIV) and AIDS pandemic. In the context of the United Nations/AIDS joint and co-sponsored programme, a thematic group, comprising all United Nations agencies concerned, has been established by the Resident Coordinator.

55. In July 1993, the Ministry of Foreign Affairs called the heads of the United Nations organizations concerned, including UNDP, the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) for a meeting and officially declared the outbreak of cholera in Djibouti. The United Nations organizations, with the support of the French military bio-force, were actively engaged in responding to the epidemic. A nationwide surveillance system was established and mass campaigns of public health education and of reinforcing the training of health personnel were conducted. WHO consultants fielded for the emergency, as well as WHO projects staff in Djibouti, participated fully in the cholera control activities in the country. UNICEF also supported provision of oral rehydration salts and essential drugs. In regard to the reconstruction and development of Djibouti, WHO intends to assist the Government particularly in promoting maternal and child health in order to reduce mother and infant mortality, developing human resource capacity, improving managerial skills of personnel and involving the community in the promotion of health.

56. The main concern of the Government in the health sector is to create a health system accessible to all. To that end, an effort has been made to develop primary health care, to establish rural health centres and to train health staff.

57. UNICEF cooperation during the 1980s focused on the promotion and implementation of primary health care, especially for universal child immunization. It has also focused on the situation of women, in terms of their health, education and overall social status. UNICEF provided supplies and equipment for the country's maternal and child health centres and supported the training of nurses, midwives and traditional birth attendants. More than three quarters of women now have access to prenatal care and supervised deliveries. Yet, one of out every 20 pregnant women still dies of pregnancy-related causes because the quality of services is low, and the status of women remains low.

58. Extensive efforts have been made to empower women and girls through the national literacy/life skills programme, which was launched in 1991. The programme makes use of facilities and teachers from the formal school system and provides two-hour classes four evenings a week during the school year.

59. Government-UNICEF cooperation during the period 1994-1998 will include three interrelated and mutually supporting programmes: health; education; and advocacy and social planning. It will pursue four major goals: (a) to reduce the infant mortality rate from 113 infant deaths per 1,000 live births to 60, and the mortality rate for children under five years of age from 158 deaths per 1,000 live births to 80; (b) to reduce the maternal mortality rate from 740 deaths per 100,000 live births to 370; (c) to reduce severe and moderate malnutrition among children under five years of age by at least 50 per cent; and (d) to empower women and girls with the basic knowledge and skills needed for healthy living. These first three goals are based on the national programme of action and on the national five-year plan, 1991-1995, and the fourth was adopted in view of the inextricable link between basic education as an empowerment strategy and the overall well-being of mothers and children. All programme activities will be linked with these four national goals for children for the 1990s.

60. A project will be implemented in close cooperation with WHO to prevent HIV/AIDS by raising public awareness through the work of community health workers with high-risk groups.

VI. CONCLUSIONS

61. Djibouti's difficulties and problems are first and foremost related to the conflicts in the Horn of Africa, which have created a large movement of displaced populations and reduced the country's revenues as a result of loss of trade and services. In addition, the recurring emergency situations (drought, flood, epidemics), combined with large-scale destruction of livestock, water points, health and education facilities as a result of the war in the country, have considerably increased Djibouti's emergency and humanitarian needs.

62. As a result of a major repatriation programme to Ethiopia and a more stringent national policy, the pressure from refugees, displaced persons and illegal immigrants has been somewhat alleviated. However, the problem of displaced persons resulting from the civil strife (1991-1993) remains and needs to be adequately addressed through specific actions, including the rehabilitation of affected areas and reintegration schemes for the returnees. As to the remaining refugees in Djibouti (most of whom are of Somali origin) UNHCR will continue to seek, in partnership with all concerned, durable solutions to their plight.

63. In this respect, the most feasible long-term solution to the presence of the refugees in Djibouti would require regional political agreements that would enable these immigrants to return to their countries and keep potential newcomers in their places of origin. This long-term action would require the formal political commitment of the concerned countries and could be facilitated by the United Nations system in close cooperation with the Djibouti-based Inter-Governmental Authority on Drought and Development.

64. There is also an urgent need to support the Government's demobilization programme through budgetary support in order to alleviate the financial constraints of demobilizing thousands of military personnel. The demobilization of military personnel is a major issue which needs to be addressed in a larger context of rehabilitation and development. The Inter-Agency Mission expressed the strong belief that demobilization was a necessary condition to the restoration of peace, stability and national reconciliation. It would encourage the internally displaced people to regain confidence and return to their homes. It would also alleviate the heavy financial burden on the national budget.

65. The immediate need is for the rehabilitation and reconstruction of damaged or destroyed social infrastructures (schools, dispensaries, water facilities) in all regions that have been affected by civil strife. External assistance sources will be requested to provide the necessary financial support, as well as equipment and materials, needed for the reconstruction phase.

66. In order to initiate the rehabilitation process, an effort will need to be made by the authorities to encourage displaced populations to return to the towns and villages they have left before serious efforts are made to restore

public services. In this way, community participation in the renovated facilities will instil in the community itself a sense of pride and ownership in the running and maintenance of services at the local level.

67. The Government is facing critical difficulties resulting from the civil strife in the country in the past few years. It is estimated that at least \$30 million will be urgently needed to mitigate the socio-economic impact of the war. In order to alleviate the financial difficulties, the Government has initiated a demobilization process involving some 12,000 military personnel. However, as this process will take several years to complete, it is appropriate to plan short-term budgetary aid and to assist in the economic and social reintegration of the demobilized personnel.

68. The large numbers of primary school drop-outs, who have insufficient skills to enter a restricted labour market, and the increasing number of young illiterates suggest a problem that needs serious consideration. The challenge will be to try to reform the educational system in order to make it less costly, more accessible and more relevant to the needs of the country. Unless more effort is made to educate and train Djiboutians, the kind of manpower development challenges now facing the country's fragile and declining economy will be difficult to meet, both in the short and the long term.

69. In order to understand better the emergency situation, it is important to assess separately the short-term needs of the different population groups, namely refugees, illegal immigrants, internally displaced persons and demobilized soldiers.

70. Refugees include a population of 35,000 in the camps as well as 22,500 who are expected to be transferred from the capital city of Djibouti to the camps in the near future. These refugees are presently assisted by UNHCR.

71. While a comprehensive survey should be carried out to ascertain the precise nature of the damage incurred and to determine what equipment is required, reports from the authorities suggest that a number of schools and dispensaries in Obock and Tadjoura districts require immediate attention.

72. A well-coordinated action by the local authorities and the active participation of returnees, including the demobilized soldiers, may secure the financial and technical support needed to get the job done quickly and effectively. In this regard, a number of projects could be initiated or reactivated in the following sectors: basic urban infrastructure maintenance, road construction and maintenance, afforestation and reforestation, water points maintenance, wells. This would also alleviate the critical unemployment situation as it would allow greater access to economic opportunities. Food aid would be an incentive for the former soldiers and returnees to participate in the rehabilitation activities. The Government has also expressed its preference for "cash and food-for-work" over free food distribution.

73. Such a rehabilitation programme would require an international presence in the affected areas in order to provide the necessary technical support and, more importantly, a sense of security and confidence to the population. In this context, UNDP could serve as the coordinating body for a cross-mandate operation

on behalf of all United Nations agencies, including the United Nations Volunteers, enlisting their active support in specific area- and community-based rehabilitation and reconstruction schemes. A phased-approach strategy should be adopted in harmony with the return of the displaced population and the pace of the demobilization process. The Inter-Agency Mission expressed the belief that the proposed rehabilitation programme would contribute to the restoration of peace and stability and would have a positive impact on the living conditions of the population.

74. In conjunction with the rehabilitation programme and as soon as the majority of the displaced persons have returned, reconstruction projects with high labour intensity would be initiated, both for public socio-economic infrastructure and private properties (housing, farms, shops, etc.).

75. These projects could be realized by small private contractors, with the strong participation of the communities. Measures would have to be taken to support the creation of micro-enterprises in all branches of activities (commerce, agriculture, fisheries, services, crafts), with an emphasis on the use of a technology appropriate to the local conditions and the use of credit and other financing mechanisms (fonds de garantie). The organizations of the United Nations system present in Djibouti are constantly dealing with that problem by developing activities related to repatriation, food distribution and education, as well as by initiating regrouping efforts to resettle refugees in camps, and by clean-up operations in the capital.

76. However, inappropriate curricula, which still reflect French educational values and not the reality of the local culture, continue to cast doubt on both the quality and relevance of what is being learned in schools by Djiboutian children. The heavy emphasis on French language acquisition at the expense of mother tongue learning in the earlier primary grades may also be contributing to the overall low achievement levels being measured in mathematics and science skills among the majority of Djiboutian children sitting French public examinations.

77. Djibouti does not provide university education, except for two courses in management and international commerce, which can be taken at the Djibouti High School, and an advanced teacher-training course in arts and literature taught by visiting professors from the University of Montpellier in France, which started in 1991/92. The large majority of students qualifying for higher education go to France on scholarships supplied by the Government, French institutions or from French aid. In 1993, 565 students received national scholarships, while about 23 per cent qualified for French aid scholarships. An attempt to de-externalize and localize further and higher education is receiving some support, but a lot more needs to be done to rethink higher education needs in the light of changing demands for higher-level manpower in a modern economy.

78. The Secretary-General remains deeply committed to the implementation of General Assembly resolution 49/21 F. He calls upon the international community to provide financial support to enable him to provide technical assistance for meeting urgent socio-economic programmes for the reconstruction and development process in Djibouti.